

# A Scan Statistic based on Anscombe's Variance Stabilization Transformation

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## OBJECTIVE

This paper proposes a new scan statistic which detects disease clusters more accurately than that based on the likelihood ratio.

## BACKGROUND

The circular spatial scan statistic proposed by Kulldorff and Nagarwalla [1] has been widely used along with SaTScan software for cluster detection. To detect arbitrarily shaped clusters which cannot be detected by the circular scan statistic, Duczmal and Assunção [2] and Tango and Takahashi [3] have proposed different scan statistics. All of these tests are based on maximizing the likelihood ratio statistic  $\lambda(Z)$  for each window  $Z$ . However, Tango and Takahashi [3] have shown examples in which Duczmal and Assunção's procedure detected quite large and peculiar shaped clusters that had the largest likelihood ratio  $\lambda$  among the three scan statistics applied. It cast a doubt on the validity of the model selection based on maximizing  $\lambda(Z)$ .

## METHODS

One of reasons for detecting undesirable clusters is that  $\lambda(Z)$  is derived only from the observed number of cases  $n(Z)$  and the expected number  $\mu(Z)$  under the null hypothesis  $H_0$  of no clustering.  $\lambda(Z)$  ignores the variability of the relative risks of regions included in  $Z$ . Then we propose an alternative scan statistic that can take such variability into account.

Assume that, under  $H_0$ , the observed number of cases  $X_i$  is a Poisson random variable with expected value  $\mu_i$  in each region  $i = 1, 2, \dots, m$ . Then, let us apply Anscombe[4]'s variance stabilization transformation:

$$Y_i = 2\sqrt{X_i + (3/8)} - 2\sqrt{\mu_i + (1/8)},$$

**Table.** Bivariate power distributions  $P(l, s) \times 1000$  of the likelihood ratio statistic  $\lambda$  and the proposed statistic  $T$  using the flexible scanning method ( $K = 15$ ) for the hot-spot cluster **A** with  $s^* = 3$  regions, where  $l$  is the length of significant MLC,  $s$  is the number of regions identified out of the assumed true cluster (see details [3]). Total number of cases is set to be 500 in the entire  $m = 113$  regions (total number of population is 19,803,618), and relative risk in the hot-spot is set to be 3.0. Nominal  $\alpha$ -level is set as 0.05 and 1000 trials are carried out. Lines of  $s = 0, 1, 2$  whose all the cells have zero power are not shown. The mark "\*" is the powers of accurate detection.

likelihood ratio statistic $\lambda$ (traditional power = 1000/1000)																
Length $l$	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	Total
Include $s = 3$	*	468	179	123	86	78	40	19	5	2	0	0	0	0	0	1000
proposed statistic $T$ (traditional power = 1000/1000)																
Length $l$	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	Total
Include $s = 3$	*	891	73	18	9	5	4	0	0	0	0	0	0	0	0	1000

where  $E(Y_i) = 0$  and  $\text{Var}(Y_i) = 1$  under  $H_0$ . For any  $Z$ , let  $\bar{y}(Z)$  and  $\bar{y}(Z^c)$  be the means of  $y_i$  within  $Z$  and outside, respectively. Then, we propose a new scan statistic  $T$  as

$$T = \max_{Z \in \mathcal{Z}} \{\bar{y}(Z) - \bar{y}(Z^c)\} / \sqrt{(1/l(Z)) + (1/l(Z^c))},$$

where  $l()$  denotes the number of regions included therein. The window  $Z^*$  which attains the maximum  $T$  is defined as the most likely cluster (MLC). In the same manner as Kulldorff's scan statistic, Monte Carlo testing is required for the distribution of  $T$  under  $H_0$ .

## RESULTS

Several scenarios of simulation were used to illustrate the proposed test statistic  $T$  with scanning methods of the circular [1] and the flexible [3]. The bivariate power distribution proposed by [3] shows that  $T$  has shorter tails and, consequently, better ability of pinpointing the assumed hot-spot cluster compared with the likelihood ratio.

## CONCLUSIONS

The proposed scan statistic can detect disease clusters more accurately than that based on the likelihood ratio.

## REFERENCES

- [1] Kulldorff M, Nagarwalla N. Spatial disease clusters: detection and inference. *Statistics in Medicine* 1995; **14**:799–810.
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